

REGIONAL OFFICE
EMPLOYEES' STATE INSURANCE CORPORATION
"PANCHDEEP BHAWAN"
5/1, GRANT LANE, KOLKATA 700 012



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Toll Free No. 1800-345-4454
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No. N/41 00 026047 000 1001/Ins.- III

Dated: 28 MAY 2010

To,

M/s. TECHNO ENGINEERING,
C/O. Mc NALLY BHARAT ENGINEERING CO. LTD.,
ADDA INDUSTRIAL AREA, KANYAPUR,
P.O. R.K. MISSION, ASANSOL,
DIST- BURDWAN
PIN- 713305

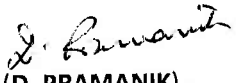
Subject: Implementation of the E.S.I. Act, 1948 and Registration of Employees of the establishment under Section 1(5) of the Act as amended.

Dear Sir,

1. It is informed that under Section 1(3) of the E.S.I. Act, 1948 the Central Government has vide notification No. **01/02/81 S-38013/26/76-SSI** dated **10/01/1981** made the provisions of the Act applicable to all **establishment** covered under the Act within the (Area) **ASANSOL**.
2. It is further informed that appropriate Government has extended the provisions of the Act to other establishment under Section 1(5) of the Act with effect from vide notification No. **16/5/90 S-38012/6/89-SSI** dated **07/05/1990**.
3. Under Section 2-A of the Act such a **establishment** is required to register itself under the act and chapter IV thereof casts a responsibility on the principal employer thereof to insure his employees and pay contributions in respect of these employees covered under the Act.
4. On the basis of the particulars in respect of your **establishment** as per the report of the inspection conducted by the Insurance Inspector who inspected your establishment on **21/04/2010**, your **establishment** falls within the purview of Section **1(5)** of the Act with effect from **02/03/2010 (Provisional)**. In case, however, subsequent facts reveal that your **establishment** was coverable from a date prior to the date mentioned above, you shall make yourself liable to comply with the provision of the Act from such earlier date.
5. It is requested to take immediate steps for registration of your employees by submitting Declaration forms, payment of contribution, maintenance of record etc, from the date of coverage of your establishment under the Act.
6. For the sake of convenience your **establishment** has been allotted code No. **41 00 026047 000 1001** which may kindly be used in all communications sent to this office and on all forms at the placed indicated for the purpose. The Branch office **ASANSOL** of the Corporation situated at "**Juin Bithi**", **Burnpure Road, Asansol-4** has been instructed to render necessary assistance to you in connection with registration of your employees. In case you find any difficulty or for any other purpose which may be necessary in connection with the Scheme you are requested to contact the Manager of the above Branch Office who will render necessary help in the matter.
7. It is requested that publicity may kindly be given to list of Insurance medical practitioner. State Insurance Dispensaries to enable your employees to choose their State Insurance Dispensaries/Insurance Medical Practitioner. Required forms etc. may please be collected from the Branch Office mentioned above to which all your employees will also be attached.

8. The Corporation Officials would be pleased to give all necessary and possible guidance to you in discharging your duties and obligations under the ESI Act, 1948, and I am confident of prompt and early compliance under the provisions of the ESI Act and Regulation on your part.
 9. It is informed that the Central Government (Vide Notification No. S-38025/04/2010-SS.I dated 20/04/2010) has issued the final Notification enhancing Wage Ceiling for coverage under ESI Act from Rs. 10000/- to Rs. 15000/- per month, w.e.f. 1st May 2010. Accordingly, all employees whose salary (excluding remuneration for over-time work) does not exceeds Rs. 15000/- per month, would become coverable under the E.S.I. Act, w.e.f. 1st May 2010.
 10. A list of Bank Branches who are authorized to accept ESI contributions is enclosed. You may choose one of the Branches convenient to you, under intimation to this office and to this office and to the concerned branch of the State Bank of India and deposit the ESI dues in that Branch only. In case no intimation is received within 15 days of the receipt of this letter the amount of contribution deposited in one of the specified branch would be considered as "Nominated Branch" for your establishment.
 11. A brochure/leaflet containing benefits available under the scheme and obligation of the employer etc. is enclosed herewith with request to give wide publicity towards smooth functioning of the scheme.
 12. Please indicate your Code No. on all correspondences to avoid delay.
- Encl: As above.

Yours faithfully,


(D. PRAMANIK)
ASSTT. DIRECTOR

Copy for information and necessary action to:

1. The Manager, Branch Office **ASANSOL** a/w advance contribution challan of Rs. 32993/-. He is to liaise with the employer to obtain his assistance for submission of DF in respect of employees so that T.I.Cs/P.I.Cs issued promptly.
2. EDP Branch.
3. The Insurance Inspector **ASANSOL** Zone. - With the instruction to conduct inspection for deciding F.D.C. positively within three months.
4. Name of the Principal Employer.
No. of Employees: **21**
Nature of Trade: **CONTRACT WORKS.**
Factory Licence No. if any
5. The Dy. Director (Finance)
6. C-6 Branch.
7. R.P.F.C. Kolkata.
8. Guard File.

ASSTT. DIRECTOR

ENSURE – TO INSURE ALL ELIGIBLE WORKERS WITH ESI FOR TOTAL SOCIAL SECURITY
267 (26/05/2010)